

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Madison Project Inc.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00298000         </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name of Payee <b>A3K Advertising Inc.</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 23 / 2015</div> </div>	
Mailing Address 1101 Wayland Dr		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4800.00</div>	
City Arlington	State TX	Zip Code 76012	<b>Transaction ID : SE.376894</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 22 / 2015</div> </div>
Purpose of Expenditure Web Development (Non-Contribution Account)		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate Rafael Edward Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">4800.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Campaign Sidekick LLC</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 23 / 2015</div> </div>	
Mailing Address 1550 Old Annetta		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5540.50</div>	
City Aledo	State TX	Zip Code 76008	<b>Transaction ID : SE.376899</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 22 / 2015</div> </div>
Purpose of Expenditure Data Purchase/Portal Setup/Phone Appends (Non-Contribution Account)		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate Rafael Edward Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">10340.50</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">10340.50</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Paul A Kilgore

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

10 / 23 / 2015

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Madison Project Inc.</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00298000	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Frontline Political Strategy</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 23 / 2015</b>	
Mailing Address <b>2416 via Bologna #2321</b>		Amount <b>719.62</b>	
City <b>Fort Worth</b>	State <b>TX</b>	Zip Code <b>76109</b>	Transaction ID : <b>SE.376905</b>
Purpose of Expenditure Pushcards (Non-Contribution Account)		Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 23 / 2015</b>
Name of Federal Candidate <b>Rafael Edward Cruz</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b>
Calendar Year-To-Date Per Election for Office Sought <b>11060.12</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Frontline Political Strategy</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 23 / 2015</b>	
Mailing Address <b>2416 via Bologna #2321</b>		Amount <b>17500.00</b>	
City <b>Fort Worth</b>	State <b>TX</b>	Zip Code <b>76109</b>	Transaction ID : <b>SE.376906</b>
Purpose of Expenditure Grassroots Consulting (Non-Contribution Account)		Category/Type <b>001</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 23 / 2015</b>
Name of Federal Candidate <b>Rafael Edward Cruz</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IA</b>
Calendar Year-To-Date Per Election for Office Sought <b>28560.12</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>18219.62</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	<b>28560.12</b>

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Mr. Paul A Kilgore

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 23 / 2015**

Signature